Instrument/Activity	Number of respondents	Number of responses per respondent	Total number of responses	Average burden per response	Total burden hours per collection
Client Surveys: Children 0–7:					
Screening and Diagnosis Tool	1400	1	1400	0.17	238
Positive Monitor Tracking	450	1	450	0.03	14
Services Child is Receiving at the time of the FASD Diagnosis	750	1	750	0.17	128
Services Planned and Provided based on Diagnostic Evaluation	750	1	750	0.33	248
Services Delivery Tracking Form	750	12	9000	0.08	720
End of Intervention/Program Improvement Measure—Case Manager	750	1	750	0.02	15
End of Intervention/Program Improvement Measure—Parent/Guardian	750	1	750	0.02	15
End of Intervention/Program Customer Satisfaction with Service	750	1	750	0.03	23
Outcome Measures (Children 0–7 years)	750	5	3750	0.08	300
Lost to follow-up	135	1	135	0.03	4
Client Surveys: Children 8–18:					
Screening and Diagnosis Tool	100	1	100	0.17	17
Services Child is Receiving at the time of the FASD Diagnosis	50	1	50	0.17	9
Services Planned and Provided based on Diagnostic Evaluation	50	1	50	0.33	17
Services Delivery Tracking Form	50	12	600	0.08	48
End of Intervention/Program Improvement Measure—Case Manager	50	1	50	0.02	1
End of Intervention/Program Improvement Measure—Parent/Guardian	50	1	50	0.02	1
End of Intervention/Program Customer Satisfaction with Service	50	1	50	0.03	2
Outcome Measures (Children 8–18 years)	50	5	250	0.08	20
Lost to follow-up	15	1	15	0.03	1
TOTAL	7,700	49	19,700	.....	1,821

Written comments and recommendations concerning the proposed information collection should be sent by June 25, 2010 to: SAMHSA Desk Officer, Human Resources and Housing Branch, Office of Management and Budget, New Executive Office Building, Room 10235, Washington, DC 20503; due to potential delays in OMB's receipt and processing of mail sent through the U.S. Postal Service, respondents are encouraged to submit comments by fax to: 202–395–5806.

Dated: May 17, 2010.

Elaine Parry,

Director, Office of Program Services.

[FR Doc. 2010–12643 Filed 5–25–10; 8:45 am]

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DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

[60Day–10–09CL]

Proposed Data Collections Submitted for Public Comment and Recommendations

In compliance with the requirement of Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 for opportunity for public comment on proposed data collection projects, the Centers for Disease Control and Prevention (CDC) will publish periodic summaries of proposed projects. To request more information on the proposed project or to obtain a copy of data collection plans and instruments, call the CDC Reports Clearance Officer on 404–639–5960 or send comments to CDC Assistant Reports Clearance Officer, 1600 Clifton Road, MS D–74, Atlanta, GA 30333 or send an e-mail to *omb@cdc.gov.*

Comments are invited on: (a) Whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including the use of automated collection techniques or other forms of information technology. Written comments should be received within 60 days of this notice.

Proposed Project

Calibration of the Short Strengths and Difficulties Questionnaire (SDQ) in the National Health Interview Survey (NHIS)—New—National Center for Health Statistics (NCHS), Centers for Disease Control and Prevention (CDC).

Background and Brief Description

Section 306 of the Public Health Service (PHS) Act (42 U.S.C. 242k), as amended, authorizes that the Secretary of Health and Human Services (DHHS), acting through NCHS, shall collect statistics on the extent and nature of illness and disability of the population of the United States. Section 520 [42 U.S.C. 290bb–31] of the Public Health Service Act, establishes the Center for Mental Health Services (CMHS),

Substance Abuse and Mental Health Services Administration (SAMHSA), and authorizes the CMHS to conduct surveys with respect to mental health. To monitor the prevalence of children and youth with mental health problems, CMHS and the National Institute of Mental Health (NIMH), through a reimbursable agreement with the NCHS have funded questions on children's mental health on the National Health Interview Study (NHIS).

One component of the NHIS is the short Strengths and Difficulties Questionnaire (short SDQ), a module that has obtained data on the mental health of children aged 4–17 years since 2001. As part of its mission, CMHS has undertaken the task of improving its methods for providing national estimates related to child mental health, specifically by conducting studies that determine validity and appropriate cut-points for measuring serious emotional disturbance in children. To ensure that the short SDQ is a valid measure of child mental health, the proposed study calibrates the short SDQ on the NHIS to a standard psychiatric measure. Highly trained clinical interviewers will administer, via telephone, the Child and Adolescent Psychiatric Assessment (CAPA) or the Pre-School Age Psychiatric Assessment (PAPA) to the parents of a sample of children aged 4–17 years identified in the NHIS as having mental health problems. Children aged 12–17 years will also be interviewed using the Child and Adolescent Psychiatric Assessment (CAPA). Clinical interviewers will also administer these assessments to a suitable control group of parents and children. Approximately 460 adults and 300 children will take part in the study. A 24-month clearance is being sought to conduct this study.

Data collected in the follow-up interviews will then be used to calibrate the short SDQ as it is used in the NHIS. Data will not be used to produce national estimates. There is no cost to respondents other than their time.

ESTIMATED ANNUALIZED BURDEN TABLE

Type of survey	Type of respondent	Number of respondents	Number of responses per respondent	Average burden per response in hours	Total burden in hours
Calibration and Control	Parents of children aged 4–8 years	50	1	1	50
	Parents of children aged 9–17 years	180	1	1	180
	Children, aged 12–17	150	1	45/60	113
Total		380			343

Dated: May 20, 2010.

Maryam I. Daneshvar,

Reports Clearance Officer, Centers for Disease Control and Prevention.

[FR Doc. 2010–12666 Filed 5–25–10; 8:45 am]

BILLING CODE 4163–18–P

DEPARTMENT OF HEALTH AND HUMAN SERVICES

Substance Abuse and Mental Health Services Administration

Agency Information Collection Activities: Proposed Collection; Comment Request

In compliance with Section 3506(c)(2)(A) of the Paperwork Reduction Act of 1995 concerning opportunity for public comment on proposed collections of information, the Substance Abuse and Mental Health Services Administration (SAMHSA) will publish periodic summaries of proposed projects. To request more information on the proposed project or to obtain a copy of the information collection plans, call the SAMHSA Reports Clearance Officer at (240) 276–1243.

Comments are invited on (a) whether the proposed collection of information is necessary for the proper performance of the functions of the agency, including whether the information shall have practical utility; (b) the accuracy of the agency's estimate of the burden of the proposed collection of information; (c) ways to enhance the quality, utility, and clarity of the information to be collected; and (d) ways to minimize the burden of the collection of information on respondents, including through the use of automated collection techniques or other forms of information technology.

Proposed Project: Assessment of the Underage Drinking Prevention Education Initiatives State Videos Project—New

The Substance Abuse and Mental Health Services Administration's Center for Substance Abuse Prevention (CSAP) is requesting Office of Management and Budget (OMB) approval of three new data collection instruments—

- State Video Contacts Form;
- Video Viewers Form; and
- Dissemination Update Online Form.

This new information collection is for the assessment of the 2010–2013 Underage Drinking Prevention Education Initiatives State Videos project. In 2007, four States participated in a pilot study to produce videos on the topic of underage drinking prevention. Based upon the success of those videos, 10 additional States and 1 Territory were provided videos in 2009. From 2010 to 2013, CSAP will invite approximately 10 States/Territories per year to produce their own videos.

Over the next 4 years, CSAP will conduct a process and outcome assessment of this project. The process assessment will focus on the experiences associated with planning and producing the State video. The outcome assessment will examine the effectiveness of the State Videos project in meeting the core project objectives and will capture the State's dissemination efforts. The process and outcome assessments will encompass State videos that will be produced in 2010–2013 and those that were produced in 2007 and 2009. State contacts will be asked to update their dissemination information online if there have been changes in these figures during the previous 6 months, up through 2013. Additionally, data will be collected from viewers of the State videos using an online survey.

The information will be collected from the primary contact employee designated by the State that is agreeing to participate in the production of a video for the State Videos project. The viewers' information will be collected from those who voluntarily decide to complete a short survey after seeing the video.

SAMHSA/CSAP intends to support annual State underage drinking prevention videos. The information collected will be used by SAMHSA/